2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 12, 2011
Secretary of State

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Entity Name: KIDNEY CLINIC OF JACKSONVILLE, LLC

Current Principal Place of Business:

14546 OLD ST. AUGUSTINE ROAD,
STE. 301
JACKSONVILLE, FL 32258

New Principal Place of Business:

14546 OLD ST. AUGUSTINE ROAD,
STE. 107
JACKSONVILLE, FL 32258

Current Mailing Address:

14546 OLD ST. AUGUSTINE ROAD,
STE. 301
JACKSONVILLE, FL 32258

New Mailing Address:

14546 OLD ST. AUGUSTINE ROAD,
STE. 107
JACKSONVILLE, FL 32258

FEI Number: 80-0466449 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

KANCHA, KOTESWARI
14546 OLD ST. AUGUSTINE ROAD,
STE. 301
JACKSONVILLE, FL 32258 US

Name and Address of New Registered Agent:

MANSUR, KADIR
14546 OLD ST. AUGUSTINE ROAD,
STE. 107
JACKSONVILLE, FL 32258 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KADIR MANSUR 01/12/2011
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MANSUR, KADIR
Address: 14546 OLD ST. AUGUSTINE ROAD, STE. 107
City-St-Zip: JACKSONVILLE, FL 32258

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: KADIR MANSUR MGRM 01/12/2011
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date